



ENERGY STAR® Qualified Product Information Form For Outdoor Residential Light Fixtures

ENERGY STAR Qualified Product Information Form for Use by ENERGY STAR Labeled Residential Light Fixture Partners (Companies who have joined ENERGY STAR for Residential Light Fixtures by signing a Partnership Agreement).

You may use this form to report those products that are sold under your company's brand name. If your firm sells models (fixtures) under a brand name different from your company name, you must list the brand name and the associated retailer/organization. Information from this form indicated with an asterisk will be added to the list of ENERGY STAR qualified residential light fixtures. Please copy this form and return one for each lamp/ballast combination to the address below.

MANUFACTURER (ENERGY STAR Partner): _____ -

SECTION I -- LAMP & BALLAST INFORMATION:

*Number of Lamps/ Fixture	Number of Ballasts/ Fixture	*Individual Listed Lamp Wattage	*Lamp Type ¹	*Ballast Type (circle one)	Lamp (e.g., lightbulb) Manufacturer & Model Number	Ballast Manufacturer & Model Number <small>Note: If no ballast is used, write "N/A"</small>
				Electronic Magnetic N/A		

1. Lamp Type: For example, FL = Fluorescent, INC = Incandescent, MH = Metal Halide, HPS = High Pressure Sodium, HAL = Halogen

SECTION II -- TEST RESULTS: (Complete using average of three or more samples)

Performance Characteristic	Test Result			Required Documentation (please attach)
Compliance With Outdoor Spec.	___ Table 2A OR ___ Table 2B			
Efficacy	___	Total Lumen Output		Test report from a lab accredited by NVLAP or other EPA approved documentation?
	___	Input Power (watts)		Test report from a lab accredited by NVLAP or other EPA approved documentation?
	___	Lumens Per Watt		Test report from a lab accredited by NVLAP or other EPA approved documentation?
Lamp Socket Compatibility		Yes	No	N/A
Controls	Time of day sensor?	Yes	No	Manufacturer documentation OR test report from a lab accredited by NVLAP, one of its MRA Signatories, or a lab accredited by an OSHA NRTL?
	Motion Sensor?	Yes	No	
	Auto-reset to Sensing Mode?	Yes	No	
Fixture Warranty		Yes	No	2-Year Written Fixture Warranty?
Safety – Hardwired Fixtures	Listed for Safety?	Yes	No	N/A
	List for Wet Location?	Yes	No	N/A
	List for Damp Location?	Yes	No	N/A

SECTION III -- FIXTURE MODELS WITH SAME LAMP/BALLAST COMBINATION:

*Model Number/Retail SKU ¹	*Brand Name	*Fixture Type ²	Does the lamp ship with fixture?	*Fixture Description ³
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	

1. List all fixture models (and Retail SKU Number when applicable) that will use this lamp/ballast combination. Only one set of test results is required per lamp/ballast combination.
2. Fixture Type: AR/O = Architectural/Other, CM = Ceiling Mounted, RE = Recessed, WM = Wall Mounted, SU = Suspended, PO = Post Top
3. E.g. "This ceiling fixture features an antique brass finish coupled with a glass dome that has a subtle swirl pattern throughout the glass." This is a marketing tool. Use additional sheets as necessary and/or send electronic descriptions with submittal.

SECTION IV -- MARKETING REQUIREMENTS:

Upon approval of this product, the Partner will take steps to ensure that the ENERGY STAR label will appear (check all that apply):

☐ **On product packaging (required)** ☐ **In product literature (required)** ☐ **On Internet site (required)**

Following ENERGY STAR acceptance of a product, partner has 90 days to fulfill the labeling requirements. ENERGY STAR reserves the right to remove a non-compliant product from the Web site after 90 days. Explain briefly in writing how you plan to implement the above listed labeling requirements within the timeline (use additional pages if necessary):

SECTION V -- SUBMITAL PROCEDURE:

1. Fill out entire ENERGY STAR for Residential Light Fixture Qualified Product Information Form.
2. Fill out one form for each lamp/ballast combination.
3. For multiple fixture models using same lamp/ballast combination list those fixture models in Section III.
4. Attach ALL required testing and verification documentation.
5. Sign and date Section VI below.
6. Keep a copy of this form and attached documentation for your records.
7. Mail this form and attached documentation to:

ICF Consulting
C/O Mehernaz Polad
1725 Eye Street NW, Suite 1000
Washington DC 20006

SECTION VI -- VERIFICATION: (To be signed by senior representative of the fixture manufacturer)

I declare that the above information is accurate and true to the best of my knowledge. I understand that if any of the above information is found to be inaccurate by ENERGY STAR or any of ENERGY STAR's contractors that the above products will be removed from the ENERGY STAR qualified product list, and that EPA may terminate the ENERGY STAR agreement between EPA and the responsible manufacturer.

Printed Name: _____

Manufacturer Signature: _____

Date: _____

Contact Number: _____

* These items will be listed on the ENERGY STAR Web site: <http://yosemite1.epa.gov/estar/consumers.nsf/content/homelighting.htm>